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| <b>REQUEST FOR ORAL HEARING</b><br>BEFORE<br><b>THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>  |   | Docket Number (Optional)<br>ORM-156CO |
|  | In re Application of Eric Chapoulaud et al.                   |                                       |
|  | Application Number<br>09/941,151                              | Filed<br>December 29, 2000            |
|  | For Custom Orthodontic Appliance Forming Method and Apparatus |                                       |
|  | Art Unit      3732  | Examiner      H. M. Eide              |
| Applicant hereby requests an oral hearing before the Board of Patent Appeals and Interferences in the appeal of the above-identified application.  |   |                                       |
| The fee for this Request for Oral Hearing is (37 CFR 41.20(b)(3))  |   | \$ 1,080.00                           |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$  |   |                                       |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.   |   |                                       |
| <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is not attached.   |   |                                       |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.                             |   |                                       |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 23-3000.                              |   |                                       |
| <input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(b) (PTO/SB/23) is enclosed. For extensions of time in reexamination proceedings, see 37 CFR 1.550.                     |   |                                       |
| <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>                |   |                                       |
| I am the   |   |                                       |
| <input type="checkbox"/> applicant/inventor.   | _____ / Thomas W. Humphrey /<br>Signature                     |                                       |
| <input type="checkbox"/> assignee of record of the entire interest.<br>See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.<br>(Form PTO/SB/96)  | _____ Thomas W. Humphrey<br>Typed or printed name             |                                       |
| <input checked="" type="checkbox"/> attorney or agent of record.   | _____ January 26, 2011<br>Date                                |                                       |
| <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34.   | _____ (513) 241-2324<br>Telephone number                      |                                       |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. |   |                                       |
| <input type="checkbox"/> *Total of 1 forms are submitted.  |   |                                       |